



September 24, 2020

Web Announcement 2313

## **Attention Provider Types 10 (Outpatient Surgery, Hospital Based) and 12 (Hospital, Outpatient) Regarding Outpatient and Outpatient Crossover Ambulatory Surgical Center Claims Billed with Anesthesia**

Outpatient and outpatient crossover claims with an Ambulatory Surgical Center (ASC) procedure code and an anesthesia code submitted electronically by provider type (PT) 10 (Outpatient Surgery, Hospital Based) or 12 (Hospital, Outpatient) that mapped to a PT 10 for adjudication instead of a PT 12 will be automatically reprocessed to adjudicate correctly. The impacted claims had dates of service on or after September 1, 2018, through February 1, 2019, and were submitted by a billing provider that has both a PT 10 location and PT 12 location with the same NPI for both service locations. A future web announcement will notify providers when the claims are reprocessed.

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.